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HEMI-SYNC® APPLICATIONS IN PSYCHOTHERAPY

by Joseph Gallenberger, PhD

Joseph Gallenberger is a clinical psychologist with eighteen years of experience as a psychotherapist in numerous settings. For the past eight years he has offered services such as insight psychotherapy, marital counseling, relaxation training, and trauma recovery to his private outpatient clients. He is experienced in training and supervising other therapists, and is a certified Monroe Institute GATEWAY OUTREACH Trainer.

He and his wife, Charleene Gallenberger, PhD, are the directors of The Open Center in Hendersowille, North Carolina, where the GATEWAY OUTREACH programs are offered. The Open Center also plans to offer group programs that blend Hemi-Sync technology and clinical instruction on issues such as sleep improvement, marriage enrichment, and adjustment to multiple sclerosis.

Recently, clients and their insurance companies have pressed for briefer treatment. This presents me with a challenge, as I want therapy to be a learning experience for the individual and not just an exercise in temporary symptom relief.

I have addressed the challenge of providing rapid treatment while increasing the client's self-understanding by using The Monroe Institute® Hemi-Sync tapes. This article gives a few examples of how this method has worked over the last three years. Names and circumstances have been modified to guard confidentiality.

Ann was referred for hypnosis. It was essential that she have a Magnetic Resonance Imaging (MRI) test as soon as possible to check for a brain tumor. She had already failed to complete the test three times, even with calming medications. The MRI involves the person remaining motionless inside a very cramped tube for hours as the machine noisily takes pictures of the brain. Many people who have no difficulty with small spaces have intense anxiety reactions in the MRI. It is not desirable to anesthetize the person for the procedure because it interferes with their being monitored well while in the tube. The MRI team

reported that, in their experience, no one who was even moderately claustrophobic had ever completed the test.

When Ann was a child, her father had held her head underwater, in the toilet, as punishment. Her mother was extremely anxious and critical. Ann had also been trapped in two fires. During a school fire, she had hidden in a locker. She could not get out and was not found until the locker was filled with smoke. In the second fire she had been unable to leave a skyscraper for hours, until a fire below was contained. As a result of these and other experiences, Ann had been extremely claustrophobic for thirty years. She had not been able to enter an elevator, or to fly in an airplane.

Ann was motivated for change but naturally frightened about the MRI and the possible results of the test. She was pessimistic about ever tolerating a space as small as an elevator for five minutes, even with other people there to comfort her. The thought of remaining motionless and alone for hours in the coffin-like MRI filled her with dread.

We met for twelve one-hour sessions in three weeks. She was immediately given the H-PLUS® tapes *Relax*, *Let Go*, and *Off-Loading*, and the MIND FOOD® tapes *Energy Walk* and *Morning Exercise*. She practiced with them diligently. After a week, we began to use the H- PLUS tape format to enter a relaxed, light hypnotic state during alternating sessions. Here we explored in more detail the origins of her fear of being trapped, and used imagery to rehearse successful completion of the MRI test. The images of being surrounded by protective white light, and of mentally expanding the space seemed particularly useful.

Throughout her adult life, Ann had not dared to dance or laugh because such acts were too spontaneous and could bring ridicule. The interpretation that she had actually trapped herself every day by being so careful to please everyone seemed to make sense to her and helped shift the emphasis away from the dimensions of physical space and to claustrophobia as a symbol of her internal state—trapped and fearing loss of control. She became determined to conquer this self-imposed restriction.

Three weeks after meeting Ann, I accompanied her to the MRI at a hospital forty miles from her home. The test was delayed two hours. The roads outside were

icing over, yet she remained only moderately anxious. When the test began she used the H-PLUS Function Commands to “relax” and “let go,” and visibly relaxed, feeling confident that she would make it. We let her know that the test could be terminated anytime she asked. She entered the machine. At her request, I read to her to link her with the outside world and to give her something positive to focus upon.

Ann was successful this time and without medication. She reported feeling two minutes of initial ill-ease, then entered into a very relaxed state and eventually went to sleep during the three-hour procedure. She, the staff, and I were amazed at her accomplishment. She went on to conquer elevators shortly thereafter with the feeling that “I can now conquer any fear.”

I have no doubt that the tapes helped quickly establish a deep therapy alliance, gave her rapid control, and allowed us to reach and “off-load” repressed material quickly and safely. This was more remarkable given that Ann had a lifelong history of understandable distrust, pessimism, self-harshness, and low self-confidence. Her triumph over the MRI left her eager to explore other aspects of her life and to make many positive changes. She used the *Emergency Series* to deal with the brain surgery she required. These tapes seemed to reduce the usual disorientation and discouragement of such surgery.

Since working with Ann, I have used the Monroe tapes clinically with excellent success in various situations, including the use of *Super Sleep* for children with learning disabilities and/or attention deficits. Most attention-disordered children have to make their beds from scratch each morning due to restless sleep. With *Super Sleep* playing all night, the bedding is intact in the morning, and parents and teachers report better concentration and less irritability during the day. The children often have difficulty listening to relaxation tapes because they are so restless. They tolerate *Super Sleep* well because it does not require the same degree of stillness and concentration, as it entrains them to a normal sleep cycle pattern.

I have used *Strong-Quick* with two weightlifters who were resisting eliminating steroid use, for fear of losing their “edge.” Most weightlifters work themselves into an aggressive state for peak performance. I suggested using *Strong-Quick* with the image of pulling powerful energy up from the earth and then becoming a

conduit for that energy. Both weightlifters reported being able to lift more weight than their best performance using steroids. They also reported an increase of smoothness and felt they had less potential for injury.

I have used *Lungs: Repair & Maintenance* with five asthmatic children and adults with excellent success. For example, one woman had difficulty climbing a short flight of stairs and was using her inhaler approximately six times per day. Within three weeks she was swimming a third of a mile per day and using her inhaler only twice per week. This gain remained consistent over a one-year period.

I use *Empathizing*, *Speak Up*, *Let Go*, and *Off-Loading* with marital situations including spouse abuse, sexual dysfunction, and marital communication problems. These tapes have worked very well. Abusers report rapid anger control. Clinical alliance deepens rapidly with these men who are usually hard to treat due to shame, skepticism, and their need for control.

Many men suffering from impotency and/or premature ejaculation have become more assertive and less performance pressured within three weeks of using these tapes as an adjunct to therapy. What has been most impressive to me in these contexts is that these strategies are effective even when the spouse refuses to join the client for therapy (which often happens in abuse and sexual dysfunction situations).

When couples are seen together, I suggest they use the above Functions before dealing with each other in session. The improvement in communication is striking. There is more listening, less accusation and defensiveness, and higher-quality problem resolution.

I have had moderate success with sleep problems, agoraphobia, and eating disorders using the Hemi-Sync tapes, and very little success with chronic back and headache pain. The most widely useful tapes for psychotherapy, in my experience, are *Let Go* and *Off-Loading*. They reduce fear and resistance, and allow more rapid softening of long-held negative thought patterns.

The tapes have worked well with the majority of clients in my practice, including some usually difficult groups such as the resistant teenager, the passive/dependent, the obsessive, the psychosomatic, and the sociopathic. I have encountered the most resistance to trying the tapes from Vietnam combat

veterans, paranoid personalities, and the “yes but” psychosomatizers. Of course, any client’s reluctance is wholeheartedly respected; however, quickly clarifying a client’s resistance can be very useful therapeutically.

I have not tried any tapes with schizophrenics and manic-depressives, but would feel comfortable doing so if they were not experiencing a psychotic episode, and therapeutic trust was functioning well.

I have also been privileged to do some fascinating work with growth-oriented clients, using the tapes of the *GATEWAY EXPERIENCE*® Wave I and Wave II. Accessing the total self and achieving age regression are facilitated greatly. For example, Pete was a young man with tremendous potential who had been badly burned as a toddler. He had the impression that his own clumsiness had resulted in the accident. His parents divorced shortly thereafter and the family was reluctant to talk about the event. He wanted to reexperience that burn to find out just what had really happened.

After a week of using the *GATEWAY EXPERIENCE* tapes, Pete used their format to achieve a Focus 12 relaxed state in the office. It was then suggested that he was completely free of time, that he was at the center of a huge wheel, and that he could go to any time period he wished by simply traveling down a spoke of the wheel. He immediately went to the burn episode, reexperienced it with tolerable distress, clearly and in great detail, and discovered many surprising and useful things, including that he was not at fault even through clumsiness.

To help achieve closure at the end of the session, I guided him to the return to his family after his hospitalization, figuring that it would be a joyful reunion. However, he became the most distressed he had been during the session. As he ran to greet his relatives, they each pulled away, being afraid of injuring his tender skin by hugging him. At eighteen months old, the age of highest separation anxiety, he was too young to handle this “rejection.” Reexperiencing this allowed him to make rapid progress on many rejection-related issues in his current life, and released him from the burden of lack of self-confidence, as he began to fulfill his potential.

The clarity and usefulness of his altered state within the first “hypnotic” session is in marked contrast to my experience using conventional hypnosis with similar

goals. Usually such quality work during hypnosis occurs after more than ten sessions, if ever, and then not as easily.

A final example also points out the powerful entrainment effects of Hemi-Sync. Beth was a bright, hard-driving, middle manager who was being severely hampered at her job by budgetary and political pressures. She had been in therapy two months and was using Wave II at home.

Beth came to a session very angry and distressed. She wanted to enter a meditative state and get answers to questions, but she was too upset. So we talked of all the work pressures and feelings that she was having. Ten minutes before the end of the session, I suggested that she could simply take a breath, close her eyes, relax, go to Focus 12, and get high-quality answers to her concerns. I then fed her five questions which were relevant to the meaning of her situation. Beth obtained immediate answers which she and I both felt were profound and perfectly on target. This gave her a sense of a quantum leap in control and expanded her definition of self. Therapeutic alliance was deepened. She saw how she could employ the same technique during the agonizing parts of her business day and left with renewed purpose and confidence.

As a therapist, it has been deeply satisfying to have a new tool which seems so safe and effective. It has helped me be a better therapist. My confidence and enjoyment in my work have increased. Neither clients nor therapists enjoy wallowing in the negativity of the discovery phase of therapy, and often feel a little bit lost as to how to implement changes rapidly and effectively once desired changes are targeted.

Hemi-Sync tapes can help many shorten the unpleasant and uncertain phases of therapy, leaving more time and resources for growth, for discovery and celebration of one's worth, and for increasing one's contribution to the world. Hemi-Sync is truly a twenty-first-century tool. It allows a smooth integration of technology with compassion and clinical skill.

Because Hemi-Sync requires no belief system other than "we are more than our physical bodies," it can be incorporated into most schools of therapy, be it ego-analytic, existential, humanistic, or behavioral, enhancing rather than straining

the modality. It answers the need for rapid results while enhancing the humanity of the client and the therapist.

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